
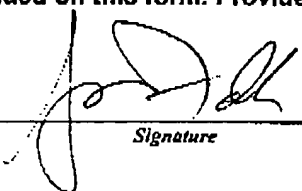


<b>CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)</b>			<b>Docket No.</b> APP 1409
Applicant(s): Prathima Agrawal et al			
<b>Application No.</b> 10/016,100	<b>Filing Date</b> 12/10/2001	<b>Examiner</b> SAGAR, Vidya S.	<b>Group Art Unit</b> 2668
Invention: Unitary, Multiple-Interface Terminal Operating with Different Transmission Protocols Over a Common Frequency Range			
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I hereby certify that this <u>Reply to Office Action of November 1, 2005</u> (Identify type of correspondence)			
is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>571-273-8300</u> )			
on <u>January 31, 2006</u> (Date)			
<u>Vivian Austin</u> (Typed or Printed Name of Person Signing Certificate)  (Signature)			
Note: Each paper must have its own certificate of mailing.			

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AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. APP 1413	
Applicant(s): Prathima Agrawal et al						
Application No. 10/016,100	Filing Date 12/10/2001	Examiner SAGAR, Vidya S.	Customer No. 09941	Group Art Unit 2668	Confirmation No. 7915	
Invention: Unitary, Multiple-Interface Terminal Operating with Different Transmission Protocols Over a Common Frequency Range						
<b>COMMISSIONER FOR PATENTS:</b>					<b>RECEIVED CENTRAL FAX CENTER JAN 31 2006</b>	
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	4 -	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	1 -	3 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
 Signature			Dated: January 31, 2006			
James W. Falk (Reg. No. 16154) Telcordia Technologies, Inc. One Telcordia Drive 5G116 Piscataway, NJ 08854-4157 Telephone (732) 699-4465			<div>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date)  Signature of Person Mailing Correspondence  Typed or Printed Name of Person Mailing Correspondence</div>			
CC:						

Appl. No. 10/016,100  
Amdt. Dated January 31, 2006  
Reply to Office action of November 1, 2005

APP 1409

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JAN 31 2006

Appl. No. : 10/016,100  
Applicants : P. Agrawal et al  
File : Dec. 10, 2001  
TC/A.U. : 2668  
Examiner : Vidya S. Sagar  
Docket No. : APP 1409 US  
Customer No. : 09941

Confirmation No. 7915

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT**

Sir:

In response to the Office Action of November 1, 2005, in the above-identified application, please amend said application as follows:

**Amendments to the Specification** begin on page 2 of this paper.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 3 of this paper.

**Remarks/Arguments** begin on page 4 of this paper.

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